

April 1, 2009

Services to restricted recipients

Under the Minnesota Restricted Recipient Program, either the Department of Human Services (DHS) or Blue Plus identifies members of Blue Plus Minnesota Health Care Programs (MHCP) who have used Medicaid services, most often prescription drugs or emergency rooms visits for non-emergent reasons, at a frequency or amount that is not medically necessary and/or who have used health care services that resulted in unnecessary costs to the program. Once identified, such recipients will be placed under the care of a primary care physician and/or other designated providers who will coordinate their care for a 24-month or a 36-month period. Please note that although other members of Blue Plus Minnesota Health Care programs require a referral only to nonparticipating providers **all services to a restricted recipient from other than the designated primary care physician require a referral.**

Restricted Recipient Program

Placement in the Restricted Recipient Program means that for a period of twenty-four (24) or thirty-six (36) months of eligibility, the enrollee must obtain health care services from:

- A designated primary care provider located in the enrollee's or recipient's local trade area
- A hospital used by the primary care provider
- A designated pharmacy

The restriction may include any other type of health care service from a designated provider, including services from a Blue Plus participating Personal Care Provider Organization (PCPO).

The DHS and health plans have developed a universal restriction, which is put in place by either the DHS or a health plan, and stays in effect for the entire period of restriction, regardless of whether the recipient does any of the following:

- Changes health plans
- Moves from fee-for-service to a health plan
- Moves from a health plan to fee-for-service

If you are a designated primary care provider, you can verify this and the restricted recipient status of a member through Blue Plus provider service or through MN-ITS, the Minnesota Department of Human Services (DHS) billing system, at www.mn-its.dhs.state.mn.us/login.html. Typically, a recipient is restricted to one primary care physician, pharmacy and hospital. A recipient may also be restricted to other designated providers or be referred by the primary care physician to other providers, if appropriate. When a member is restricted only for certain types of services, no referral is required

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for other types of service from a participating provider. Long-term care facility services are not subject to restriction.

Claims reimbursement

Effective May 1, 2009, eligible services provided to a restricted recipient will only be reimbursed when one of the following criteria is met:

- The service is provided by the recipient's primary care physician or his/her designee
- The primary care physician has made a referral to another provider
- The service is of a provider type or type of service that is not listed as restricted on the recipient's file

Additional information

Providers may access more information about the Minnesota Restricted Recipient Program on the DHS website with the following link:

www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=id_008922#mrrp.

Questions?

If you have questions, please contact provider service at **(651) 662-5200** or **1-800-262-0820**.